PLANNING AND ZONING COMMISSION TOWN OF TRUMBULL

APPLICATION FOR APPROVAL OF LIQUOR LOCATION

	Date:
1.	Location of premises:
	(number) (street) If premises are located in a shopping area, indicate location on plot plan)
2.	Name of applicant:
3.	Address of applicant:
4.	Owner of record:
5.	Address of owner of record:
6.	Applicant's interest in premises:(Owner, Lessee, etc.)
7.	If premises are not presently ready for occupancy, premises will be ready for occupancy on
	(Date)
8.	Leased Premises: In the lease governing subject premises, is the sale of alcoholic liquor permitted prohibited neither
9.	Prior application: If any prior application has been filed for these premises, give date and results of hearing on prior application, and change of circumstances relied upon in this application:
10.	Type of Permit: Approval of this location is requested for a Permit. (State class or type of permit)
11.	Nearest Outlet. Distance between entrance to subject premises and entrance to nearest premises having the class of permit sought in this application feet

12. Sho	opping Centers: (See paragraph A, Section 4.1)	
1)	Total floor area (rental retail and/or commercial business floor area of shopping center)	
	square feet	
2)	Total number of existing outlets and classes of permits:	
	Restaurant (Full liquor)	
	Restaurant (Beer)	
	Restaurant (Wine and Beer)	
	Package Store	
3)	Minimum floor area of premises to be used for a Restaurant Permit. Full Liquor square feet	
	IN THE AMOUNT OF \$460.00 MUST ACCOMPANY THIS APPLICATION. check payable to Town of Trumbull.	
Signature of applicant: Signature of record owner:		
Applica	ation shall be accompanied by a plot plan showing the tract of land on which the premises	
are loca	ated, relation of premises to adjacent highways. Plot plan shall be a part of the application,	
and sha	all indicate size of lot upon which the premises are to be located, dimensions of buildings,	
and oth	ner pertinent information. Where it is stated that sale of alcoholic liquor is permitted by	
lease, a	attach copy of lease.	
FOR O	FFICE USE ONLY	
Date ap	oplication and fee received:	
Zone ir	n which premises are located:	
Permit	issued:	
Date ar	oplication to Liquor Control Commission certified by Chairman:	